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CONFIRMATION NO. 5213

<b>SERIAL NUMBER</b> 09/640,865	<b>FILING OR 371(c) DATE</b> 08/18/2000 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3734	<b>ATTORNEY DOCKET NO.</b> 0984-0204
<b>APPLICANTS</b> Adrian Ravenscroft, Milton, MA; Stephen J. Kleshinski, Scituate, MA;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/360,654 07/26/1999 PAT 6,258,026				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/02/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 7	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 61263				
<b>TITLE</b> REMOVABLE EMBOLUS BLOOD CLOT FILTER AND FILTER DELIVERY UNIT				
<b>FILING FEE RECEIVED</b> 410	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	